This form is a	approved by the I	llinois Suprem <mark>e Court and is requi</mark> red to be accep		
STATE OF ILLINOIS,		EXHIBIT B For Court Use Only		
CIRCUIT COURT				
n.a. r		SUMMONS	•	
Madison	_ COUNTY			
Instructions >				
Enter above the county	CHERYL KE	SSLER		
name where the case	Plaintiff / Per	itioner (First, middle, last name)		
was filed.		i		
Enter your name as Plaintiff/Petitioner.	v.			
Enter the names of all		•		
people you are suing as Defendants/		RESS OF ST. LOUIS	2023LA000515	
Respondents.	Defendant / I	Respondent (First, middle, last name)	Case Number	
Enter the Case Number given by the Circuit Clerk.	Alias Summons (Check this box if this is not the 1 st Summons issued for this Defendant.)			
	There may be co	yet food to start or record de		
	for a fee waiver.	urt fees to start or respond to a case. If you are unabl You can find the fee waiver application at: <u>illinoisco</u> forms/.	e to pay your court fees, you can apply ourts.gov/documents-and-	
	F-filing is now r	nandatory with limited exemptions. To e-file, you m	vat first anate as a second side	
	filing service pro	wider. Visit efile.illinoiscourts.gov/service-providers	thin to learn more and to select a	
IMPORTANT INFORMATION:	service provider	If you need additional help or have trouble e-filing.	visit illinoiscourts.gov/fag/getheln.asn	
INFORMATION:	or talk with you	local circuit clerk's office. If you cannot e-file, you	may be able to get an exemption that	
	allows you to fil illinoislegalaid.c	e in-person or by mail. Ask your circuit clerk for mor	re information or visit	
	fill out and file f	ris Court Help at 833-411-1121 for information abounces. You can also get free legal information and legal	t how to go to court including how to gal referrals at <u>illinoislegalaid.org</u> .	
	Do not use this f	orm in an eviction, small claims, detinue, divorce, or	replevin case. Use the Eviction	
	Summons, Small	Claims Summons, or Summons Petition for Dissoluti	ion of Marriage / Civil Union available	
Plaintiff/Petitioner:	at <u>illinoiscourts.g</u>	ov/documents-and-forms/approved-forms. If your ca	ase is a detinue or replevin, visit	
	illinoislegalaid.o	<u>-</u>	·	
	If you are suing	nore than 1 Defendant/Respondent, fill out a Summo	ns form for each	
	Defendant/Respo	ndent.		
In 1a, enter the name	1. Defen	dant/Respondent's address and service info		
and address of a				
Defendant/		efendant/Respondent's primary address/informa		
Respondent. If you are serving a Registered		Name (First, Middle, Last): BONZAI EXPRESS OF ST. LOUIS		
Agent, include the		Registered Agent's name, if any: KEITH KITSIS		
Registered Agent's		reet Address, Unit #: 6679 EDWARDSVILLE	CROSSING DRIVE	
name and address here.		ity, State, ZIP: EDWARDSVILLE, IL 62025		
	T ₁	elephone: Email:		
In 1b, enter a second	b. If	you have more than one address where Defend	lant/Respondent might be found.	
address for Defendant/ Respondent, if you	lis	t that here:	,	
have one.	N	ame (First, Middle, Last):		
	S	reet Address, Unit #:	## ·	
	C	tv. State, ZIP:		
In 1c, check how you	T,	ty, State, ZIP:		
are sending your	l elephone: Email:			
documents to	c. Method of service on Defendant/Respondent:			
Defendant/ Respondent.	l✓	Sheriff Sheriff outside Illinois:		
resolutiont:	F	Charial present	County & State	
		Special process server	d private detective	

In 2, enter the amount of money owed to you.

In 3, enter your complete address, telephone number, and email address, if you have one.

2. Information about the lawsuit:

Amount claimed: \$50,001.00

Contact information for the Plaintiff/Petitioner:

Name (First, Middle, Last)	: STEVEN DUKE
Street Address, Unit #:	900 SPRUCE ST., SUITE 150

City. State, ZIP: ST. LOUIS, MO 63102

Telephone: (314) 888-4444 Email: steve.duke@dmlawusa.com

GETTING COURT DOCUMENTS BY EMAIL: You should use an email account that you do not share with anyone else and that you check every day. If you do not check your email every day, you may miss important information, notice of court dates, or documents from other parties.

Important information for the person getting this form

You have been sued. Read all of the documents attached to this Summons.

To participate in the case, you must follow the instructions listed below. If you do not, the court may decide the case without hearing from you and you could lose the case. *Appearance* and *Answer/Response* forms can be found at: illinoiscourts.gov/documents-and-forms/approved-forms/.

Check 4a or 4b. If Defendant/Respondent only needs to file an Appearance and Answer/Response within 30 days, check box 4a. Otherwise, if the clerk gives you a court date, check box 4b.

In 4a, fill out the address of the court building where the Defendant may file or e-file their Appearance and Answer/Response.

In 4b, fill out:

- The court date and time the clerk gave you.
- •The courtroom and address of the court building.
- The call-in or video information for remote appearances (if applicable).
- •The clerk's phone number and website. All of this information is available from the Circuit Clerk.

a. To respond to this Summons, you must file Appearance and Answer/Response forms with the court within 30 days after you have been served (not counting the day of service) by e-filing or at:

Address: __155 N MAIN ST_EDWARDSVILLE IL 62025 City, State, ZIP: ____

Attend court:		
Qn:	at	a.m. p.m. in
Date	Time	Courtroom
In-person at:		
Courthouse Address	City	State ZIP
OR		
Remotely (You may be	able to attend this co	ourt date by phone or video conference.
This is called a "Remote	Appearance"):	
By telephone:		
	all-in number for teleph	none remote appearance
By video conferen	ce:	
•	Video conferenc	e website
Video conference le	g-in information (meetii	ng ID, password, etc.)
Call the Circuit Clerk at:		or visit their website
. /	Circuit Clerk's phon	
at:		to find out more about how to do this.
Website		医皮肤的现在分词

STOP!

The Circuit Clerk will fill in this section.

STOP!

The officer or process server will fill in the Date of Service. 4/12/2023 Witness this Date:

Clerk of the Court: /s/ Thomas McRae /s/ Michelle L Price

This Summons must be served within 30 days of the witness date.

The commone must be served within 50 days of the withess date.

Date of Service:

(Date to be entered by an officer or process server on the copy of this Summons left with the Defendant or other person.)

This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts.

STATE OF ILLINOIS, CIRCUIT COURT		PROOF OF SERVICE OF	For Court Use Only
Madison	COUNTY	SUMMONS AND COMPLAINT/PETITION	
Instructions		•	
Enter above the county name where the case was filed.	CHERYL KES Plaintiff / Petit	SLER ioner (First, middle, last name)	·
Enter your name as Plaintiff/Petitioner.	•		
Enter the names of all people you are suing as Defendants/ Respondents. V. BONZAI EXPRESS OF ST. LOUIS		RESS OF ST. LOUIS espondent (First, middle, last name)	
Enter the Case Number given by the Alias Sumi		mons (Check this box if this is not the 1 st ed for this Defendant.)	2023LA000515 Case Number
		the form. The sheriff or special process s	•
My name is	First Middle Last	and I sta	te .
		omplaint/Petition on the Defendant/Respo	
Fine 6 Middle 1 - 1			as follows:
First, Middle, Last			•
		dant/Respondent:] Non-Binary	Race:
Addre	ss, Unit#:	at this time:]a.m.
☐ On so		Defendant/Respondent's home who is at lea	
On thi Addre City, S	s date:ss, Unit#:	at this time:	
	Female [fiddle, Last	Race:
☐ On the	Corporation's ag	ent,	<u> </u>
Addres	s date:ss:	Non-Binary	

First	, Middle, Last				
l ma	ide the follow	ing attempts to s	serve the S <i>ummons</i> and Comple	aint/Petition on the Defen	dant/Respondent:
1.	Address:		at this time:	***************************************	
	City, State, Other inforr	ZIP: mation about ser	vice attempt:		
2.	On this date		at this time:		
	City, State,	ZIP: mation about ser	vice attempt:		
3,	Address: _ City, State,	ZIP:	at this time:		
		Takon about oo.	no atompt.		
this sect sheriff o	r private server will	your signatu	special process server, sherifi tre certifies that everything or e best of your knowledge. Yould be perjury.	the <i>Proof of Service</i> or	Summons is true and
Civil Pro ILCS 5/ making a on this followed to	ne Code of coedure, 735 1-109. a statement form that you be false is a Class 3	By: Signature by:	☐ Sheriff ☐ Sheriff outside Illinois: County and State ☐ Special process server ☐ Licensed private detective	FEES Service and Return: Miles Total	\$ \$ \$0.00
		Print Name If Summons i License Num	s served by licensed private det ber:	ective or private detective	e agency;